

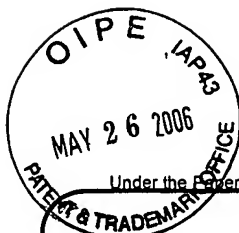
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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

9

Application Number  
10/717,738Filing Date  
November 20, 2003First Named Inventor  
H. OdakaArt Unit  
1614Examiner Name  
K. WeddingtonAttorney Docket Number  
2596 US1P

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Remarks The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account 500799.	

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature	<i>Elaine M. Ramesh</i>		
Printed name	Elaine M. Ramesh, Ph.D., JD		
Date	5/26/06	Reg. No.	43,032

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THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/717,738  
Filed: November 20, 2003  
1<sup>st</sup> Inventor: H. Odaka  
For: Agent for Improving Acidosis  
Atty. Dkt. No. 2596 US1P

Art Unit: 1614  
Examiner: K. Weddington  
Allowed:  
Batch:  
Paper No.:

**AMENDMENT "D"**

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action mailed March 28, 2006, Applicants respectfully request reconsideration of the claims in view of the amendment and remarks set forth below.

**AMENDMENT**